

FOIA Request # EPA-R2-2015-011038

On August 1, 2011, NJDEP assumed responsibility for the issuance of EPA ID's for Hazardous Waste activities in New Jersey, including permitting, remediation activity and emergency situation. USEPA Region 2 will no longer perform this function. The contact information for requesting an Id No. is: NJ Dept. of Environmental Protection Hazardous Waste Compliance & Enforcement, 9 Ewing St. 3rd fl., Mail Code 09-03, P.O. Box 420, Trenton, NJ 08625-0422, Tel: 609-292-2913, fax: 609-292-3970.

We have listed in our database that NJDEP also received an EPA ID Number Notification Form for Any Garment Cleaners at 1299 McCarter Highway in Newark, New Jersey, and EPA ID No. NJR000074021. The notification form was received at NJDEP on or about July 2, 2013. You will need to contact NJDEP for further information.



# RCRARep Handler Detail Report

Report run on: September 30, 2015 5:01 PM

## Facility Information

ID / Dist	Name / Location Address ...	County	Regulated Activity
NJR000074021	ANY GARMENT CLEANERS		
	NORTHERN 1299 MCCARTER HWY		
	NEWARK NJ 07106	ESSEX	

### Other State Interests

-State Not a generator, Verified

### Sources Overwritten Prior to 2001 (before RCRA kept history for activity/address/contact)

07/02/13 N Notification

06/26/09 N Notification

### Extract Flag

All data for this Handler is released to the Public (except any enforcement-sensitive CME data)

### Activity Location

Handler Module Data for NJ State only

### Location Address

07/02/13 Notification	1299 MCCARTER HWY ESSEX NEWARK, NJ 07106 State District: NORTHERN Land Type: Private (P)	(NJ013)
06/26/09 Notification	1299 MCCARTER HWY ESSEX NEWARK, NJ 07106 State District: NORTHERN Land Type: Private (P)	(NJ013)

### North American Industrial Classification (NAICS)

07/02/13 Notification	221118
06/26/09 Notification	81232

221118 OTHER ELECTRIC POWER GENERATION

81232 DRYCLEANING AND LAUNDRY SERVICES (EXCEPT COIN-OPERATED)

### Mailing Address

07/02/13 Notification	1299 MCCARTER HWY NEWARK, NJ 07106
06/26/09 Notification	1299 MCCARTER HWY NEWARK, NJ 07106

### Contact

07/02/13 Notification	CARRIE RENZI 1299 MCCARTER HWY NEWARK, NJ 07104 Phone: (732)252-3952
06/26/09 Notification	CARLOS H MARROQUIN 1299 MCCARTER HWY NEWARK, NJ 07106 Phone: (973)337-1161

# RCRAREp Handler Detail Report

Report run on: September 30, 2015 5:01 PM

NJR000074021

## Legal Owner/Operator of Site

07/02/13 Notification Current Owner from 05/24/2010 -  
ANY GARMENT CLEANERS (Other land type)  
1299 MCCARTER HWY  
NEWARK, NJ 07104  
Phone: (732)252-3952

06/26/09 Notification Current Owner from 06/01/2007 -  
MCCARTER HIGHWAY HOLDING (Private)  
2 KENSINGTON PLACE  
ROSELAND, NJ 07068

06/26/09 Notification Current Operator from 06/24/2009 -  
CARLOS MARROQUIN (Private)

## Regulated Hazardous Waste Activities

07/02/13 Notification  
Federal Not a Generator

06/26/09 Notification  
Federal Small Quantity Generator  
State This option is not active

## Waste Codes

07/02/13 Notification D001

06/26/09 Notification D007 D029 D039 D040 F002

D001 IGNITABLE WASTE

D007 CHROMIUM

D029 1,1-DICHLOROETHYLENE

D039 TETRACHLOROETHYLENE

D040 TRICHLOROETHYLENE

F002 THE FOLLOWING SPENT HALOGENATED SOLVENTS: TETRACHLOROETHYLENE, METHYLENE CHLORIDE, TRICHLOROETHYLENE, 1,1,1-TRICHLOROETHANE, CHLOROBENZENE, 1,1,2-TRICHLORO-1,2,2-TRIFLUOROETHANE, ORTHO-DICHLOROBENZENE, TRICHLOROFLUOROMETHANE, AND 1,1,2, TRICHLOROETHANE; ALL SPENT SOLVENT MIXTURES/BLENDS CONTAINING, BEFORE USE, A TOTAL OF TEN PERCENT OR MORE (BY VOLUME) OF ONE OR MORE OF THE ABOVE HALOGENATED SOLVENTS OR THOSE SOLVENTS LISTED IN F001, F004, AND F005; AND STILL BOTTOMS FROM THE RECOVERY OF THESE SPENT SOLVENTS AND SPENT SOLVENT MIXTURES.

## Certification

07/02/13 Notification OWNER CARRIE RENZI  
Signed: 06/28/13

06/26/09 Notification OPERATOR CARLOS H MARROQUIN  
Signed: 06/24/09



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF  
HAZARDOUS WASTE ACTIVITY**

08/03/2009

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

**EPA I.D. NUMBER:** NJR000074021

**INSTALLATION NAME:** ANY GARMENT CLEANERS

**INSTALLATION ADDRESS :** 1299 MCCARTER HWY  
NEWARK, NJ 07106

**MAILING ADDRESS :** 1299 MCCARTER HWY  
NEWARK, NJ 07106

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2  
RCRA Programs Branch  
290 Broadway, 22nd Floor  
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS  
Tel : (212) 637-4106  
Fax: (212) 637-4437**

**TO: ANY GARMENT CLEANERS  
or Current Occupant  
ATTN: CARLOS MARROQUIN  
1299 MCCARTER HWY  
NEWARK, NJ, 07106**

ACKNOWLEDGMENT OF NOTIFICATION  
OF  
MAXIMUM FINE



I, the undersigned, do hereby acknowledge the receipt of the notification of the maximum fine for the violation of the provisions of the [illegible] Act, Chapter [illegible], Section [illegible], of the [illegible] Code, and I further acknowledge that I have read and understand the contents of the notification.

Witness my hand and seal this [illegible] day of [illegible], 19[illegible].

Signature of [illegible]

Printed name of [illegible]

Address of [illegible]

City of [illegible]

State of [illegible]

County of [illegible]

Notary Public for the State of [illegible]

My commission expires on the [illegible] day of [illegible], 19[illegible].

Subscribed and sworn to before me this [illegible] day of [illegible], 19[illegible].

Notary Public for the State of [illegible]

**SEND COMPLETED****FORM TO:**The Appropriate State or  
EPA Regional Office.

United States Environmental Protection Agency

**RCRA SUBTITLE C SITE IDENTIFICATION FORM**1. Reason for  
Submittal  
(See instructions  
on page 13.)MARK ALL BOX(ES)  
THAT APPLY

Reason for Submittal:

- ☒ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # \_\_\_\_\_)
- ☐ As a component of the Hazardous Waste Report

2. Site EPA ID  
Number (page 14)EPA ID Number NJ R 000 074 0213. Site Name  
(page 14)Name: ANY GARMENT CLEANERS4. Site Location  
Information  
(page 14)Street Address: 1299 McCARTER HWYCity, Town, or Village: NEWARKState: NJCounty Name: ESSEXZip Code: 071065. Site Land Type  
(page 14)Site Land Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other6. North American  
Industry  
Classification  
System (NAICS)  
Code(s) for the Site  
(page 14)A. 7212B.       C.       D.       7. Site Mailing  
Address  
(page 15)Street or P. O. Box: 1299 McCARTER HWYCity, Town, or Village: NEWARKState: NJCountry: USAZip Code: 071068. Site Contact  
Person  
(page 15)First Name: CARLOSMI: HLast Name: MARROQUINPhone Number: 975 352 1001 Extension:       Email address:       9. Operator and  
Legal Owner  
of the Site  
(pages 15 and 16)A. Name of Site's Operator: CARLOS MARROQUIN (ANY GARMENT CLEANERS) Date Became Operator (mm/dd/yyyy): 06/24/09Operator Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ OtherB. Name of Site's Legal Owner: McCARTER HIGHWAY HOLDINGDate Became Owner (mm/dd/yyyy): 06/01/07Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other





9. Legal Owner (Continued) Address	Street or P. O. Box: <u>2 KENSINGTON PL</u>	
	City, Town, or Village: <u>ROSELAND NJ 07068</u>	
	State: <u>NJ</u>	
	Country: <u>USA</u>	Zip Code: <u>07068</u>

## 10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

## A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☐ N ☒ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)  
of non-acute hazardous waste; or☒ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)  
of non-acute hazardous waste; or☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)  
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☒ d. United States Importer of Hazardous WasteY ☐ N ☒ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☒ 2. Transporter of Hazardous WasteY ☐ N ☒ 3. Treater, Storer, or Disposer of  
Hazardous Waste (at your site) Note:  
A hazardous waste permit is required for  
this activity.Y ☐ N ☒ 4. Recycler of Hazardous Waste (at your  
site)Y ☐ N ☒ 5. Exempt Boiler and/or Industrial  
Furnace

If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner  
Exemption☐ b. Smelting, Melting, and Refining  
Furnace ExemptionY ☐ N ☒ 6. Underground Injection Control

## B. Universal Waste Activities

Y ☐ N ☒ 1. Large Quantity Handler of Universal Waste (accumulate  
5,000 kg or more) [refer to your State regulations to  
determine what is regulated]. Indicate types of universal  
waste generated and/or accumulated at your site. If "Yes",  
mark all boxes that apply:

	<u>Generate</u>	<u>Accumulate</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☒ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

## C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☒ 1. Used Oil Transporter  
If "Yes", mark each that applies.☐ a. Transporter  
☐ b. Transfer FacilityY ☐ N ☒ 2. Used Oil Processor and/or Re-refiner  
If "Yes", mark each that applies.☐ a. Processor  
☐ b. Re-refinerY ☐ N ☒ 3. Off-Specification Used Oil BurnerY ☐ N ☒ 4. Used Oil Fuel Marketer  
If "Yes", mark each that applies.  
☐ a. Marketer Who Directs Shipment of  
Off-Specification Used Oil to  
Off-Specification Used Oil Burner  
☐ b. Marketer Who First Claims the  
Used Oil Meets the Specifications



A. **Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.



[illegible]

Date Signed  
(mm/dd/yyyy)

6/24/09

